

D.C. Emancipation Day 2005



Parade Participation Form

PLEASE TYPE OR PRINT ALL THE INFORMATION ON THIS FORM

*FAX FORM BACK TO (202) 727-3582
Attn: Emancipation Day Committee*

SCHOOL NAME: _____

PARTICIPATING GROUP'S CONTACT: _____

PHONE NUMBER and FAX NUMBER: _____

PRINCIPAL'S NAME: _____

Please indicate how your school will participate, below:

☐ **Marching Band**

☐ **Choir**

☐ **Cheerleaders / Pom Poms**

☐ **Musical Ensemble**

☐ **Drill Team**

☐ **Dramatic Presentation**

☐ **OTHER (Explain)** _____

NUMBER OF PEOPLE IN GROUP: _____

Please note your preference for the parade (10 a.m.) or the program (2 p.m.):

☐ **Parade**

☐ **Program**

For more information please contact the Office of the Secretary of D.C. at (202) 727-6306

ALL RESPONSES MUST BE RECEIVED BY MONDAY, APRIL 7, 2005